## PATENT APPLICATION ATTOR,

DECLARATION	AND POWER	OFTORNEY
EOD DATES T AD	DITCATION	

DOCKET NO. <u>0029-011</u>

EOR PATIENT APPLICATION As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, f	first and sole i	nventor (if only on	e name is lis	sted below) o	r an original, firs	st and joint i	inventor (if plural names
are listed below) of the subje	ect matter whi	ch is claimed and i	for which a p	us and Metho	nt on the mivenil	Jii cillilica.	
the angeliantion of which is	attached here				<u>,                                    </u>		
the specification of which is attached hereto unless the following box is checked:  () was filed on as US Application Serial No. or PCT International Application							
Number and was amended on (if applicable).							
I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by							
any amendment(s) referred	to above. I ac	knowledge the dut	v to disclose	all informati	ion which is mate	erial to pate	ntability as defined in 37
CFR 1.56.	10 400 70. 1 40	idio il lougo il lo out	,			•	•
CI K 1.50.							
Foreign Application(s) and/or C	laim of Foreign	Priority					
I harabu alaim foreign priority her	nefits under Title	35 United States Cod	e Section 119	of any foreign a	pplication(s) for pate	ent or inventor	(s) certificate listed below and
have also identified below any fore	eign application f	or patent or inventor(s)	certificate havi	ng a filing date l	before that of the app	olication on wh	nich priority is ciainled.
COUNTRY	APPLICATI	ON NUMBER	DATE FILED		PRIORITY CLAIMED UNDER 35 U.S.C. 119		
						YES:	NO:
						YES:	NO:
Prodicional Application							
I hereby claim the benefit under Ti	itle 35, United Sta	ates Code Section 119(	e) of any United	I States provision	nal application(s) list	ted below:	
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<b>7</b> 500	APP	LICATION SERIAL N	UMBER	FIL!	ING DATE		
# i							
	-						
USiPriority Claim I hereby claim the benefit under T	itle 35. United St	ates Code, Section 120	of any United	States application	on(s) listed below an	d, insofar as th	ne subject matter of each of the
alfilms afthis application is not di	coloced in the pri	or United States annlic	ation in the mar	nner provided by	v the first paragraph (	of title 35. Un	illed States Code Section 112, 1
acknowledge the duty to disclose	material informa	tion as defined in Title	: 37, Code of Fo	ederal Regulatio	ons, Section 1.36(a)	which occurred	I between the fining date of the
prior application and the national	or PC 1 internatio	mai minig date of this a	pprication.				
APPLICATION SERIAL N	IUMBER	R FILING DATE			STATUS(patented/pending/abandoned)		
	. 27-1 TATE STATE						
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POWER OF ATTORNEY:	•						11.1
As a named inventor, I hereby a	ppoint the follow	ing attorney(s) and/or	agent(s) listed	below to prose	cute this application	and transact	all business in the Patent and
Trademark Office connected there	ewith.						
Larry E. H	Ienneman, Jr., R	eg. No. 41,063					
, 2011, 21		,					
Send Correspondence to:					Direct Teleph	one Calls To:	
I E Hamaman In					Larry E. Hen	neman, Jr.	
Larry E. Henneman, Jr. Henneman & Saunders					209-833-8820		
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Tracy, CA 95376							
			as the sand that	all statements n	ande on information	and helief are	helieved to be true; and further
I hereby declare that all statement that these statements were made v	ts made herein of	my own knowledge at that willful false stat	ements and the	like so made are	e punishable by fine	or imprisonme	ent, or both, under Section 1001
of Title 18 of the United States Co	ode and that such	willful false statements	s may jeopardiz	e the validity of	the application or an	y patent issued	thereon.
Full Name of Inventor: Carl W.	. Gowan				Citizenship: 1	D <sub>O</sub>	
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Suller A Larya	10/2/01				
Inventor's Signature	Date				
Full Name of Inventor:	Citizenship:				
Residence:					
Post Office Address:					
Inventor's Signature	Date				
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Residence:					
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Post Office Address:					
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Inventor's Signature					